

DATE: 01/22/2015

DEPARTMENT HEAD: Juan Martinez

DEPARTMENT NAME: Fire Marshal's Office

ACCOUNT NUMBER: 5-1100-422-10-300-001-0-XXX

SUBJECT: **Budget Line-Item Transfer(s)**

**Honorable Commissioner's Court of Hidalgo County:**

I submit to you for your consideration the following line-item transfer(s) in accordance with Local Government Code, Chapter 111, Subchapter C.

FROM ACCOUNT NUMBER	ACCOUNT NAME		TO ACCOUNT NUMBER	ACCOUNT NAME
550	FIRE MARSHAL- PRINTING AND BINDING	->	331	FIRE MARSHAL - PHYSICIAN SERVICES
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**REASON:** Pay for deputy physical exams and psychological exam

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DEPARTMENT HEAD SIGNATURE

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APPROVED COMMISSIONERS' COURT

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/ /  
DATE

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ATTEST COUNTY CLERK



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